

COLOMBIA

Violence Against Health Care in Conflict 2024



Letter from the Chair



Assaults on health care in conflicts around the world reached new levels of horror in 2024, exceeding 3,600 incidents, 15% more than in 2023. They consisted of air, missile, and drone strikes; shelling; tank fire; shootings; arson; the looting and takeover of health facilities; and the arrest and detention of health workers. As the descriptions in this report show, each incident brings terror, trauma, and - in too many cases - injury, untreated illness, destruction and death.

By far the largest number of attacks on health care – more than 1,300 – took place in Gaza and the West Bank, far more than we have ever reported in one conflict in one year, including more than double the number of health workers killed. Gaza properly drew global attention for the ferocity and relentlessness of assaults on health care. But we must also reckon with the more than 2,300 attacks in other conflicts, including the hundreds in each of Ukraine, Lebanon, Myanmar and Sudan. The cumulative number of attacks over the course of wars that began in the past three years include more than 1,500 in Myanmar since the military coup in 2021; close to 2,000 in Ukraine since the Russian invasion of Ukraine in 2022, and more than 500 since the outbreak of war in Sudan in 2023.

This onslaught of violence has been accompanied by attempts by perpetrators to limit legal protections for health care and civilians in war, driven, as the International Committee of the Red Cross (ICRC) puts it, by a desire to have more “leeway to kill and detain.” Israel has sought to dilute legal requirements of precaution and proportionality during conflict. The new U.S. secretary of defense has called for “a law of war for winners.” Simultaneously, campaigns to delegitimize the International Criminal Court (ICC) are underway. The newly inaugurated U.S. president Donald Trump imposed sanctions on ICC staff and even their families for having charged Israelis with war crimes. In 2023, Russia’s Duma passed legislation criminalizing cooperation with the ICC or any foreign court or ad hoc tribunal that seeks to hold Russians to account. Hungary announced its plan to withdraw from the ICC, falsely alleging political bias.

These terrible developments threaten to make a mockery of the 10th anniversary of Security Council Resolution 2286 in 2026 and the 50th anniversary of the Additional Protocols of the Geneva Conventions (the law protecting health workers and civilians during armed conflict) in 2027. If this resolution and law are to be more than words, the current approach to protection, amounting to mere admonitions, must be replaced by centering accountability, accompanied by the political will to drive it.

That is the approach long taken by the Coalition, and recently taken by a report *In the Line of Fire*, issued in November 2024 by the World Health Organization and the World Innovation Summit for Health. It called for a new alliance of member states, UN agencies, and NGOs. It recognized that the renewal of long-ignored commitments could not possibly suffice. Instead, UN agencies, international organizations, NGOs, and civil society organizations must rally together to take tough action, including outreach to the International Criminal Court, to impose consequences on the perpetrators of violence. Actions must include states cutting off arms transfers to perpetrators of attacks and employing the power of universal jurisdiction to prosecute. If the laws of humanity are to be upheld and the carnage is to end, governments and all concerned citizens everywhere must find the political courage and will to act.

A handwritten signature in black ink, reading "Len Rubenstein".

Len Rubenstein
Chair, Safeguarding Health in Conflict Coalition

 [Executive Summary](#) | [Full Report](#) | [Recommendations](#) | [Methodology](#) | [Data](#)



REPORTED INCIDENTS AND MOST COMMONLY REPORTED CONCERNS

 REPORTED INCIDENTS	 INCIDENTS WHERE HEALTH FACILITIES WERE ATTACKED	 INCIDENTS AFFECTING EMERGENCY MEDICAL SERVICES
2024		
18	7	7
2023		
18	1	3
2022		
13	3	3

↓ Source: 2022–2024 COL SHCC Health Care Data

OVERVIEW

The Safeguarding Health in Conflict Coalition (SHCC) identified 18 incidents of violence against or obstruction of health care in Colombia in 2024, compared to 18 in 2023 and 13 in 2022. In 2024, health facilities were attacked seven times and emergency medical services were attacked on seven occasions. The actual number of incidents and the severity of the problem are likely much greater.

-  Armed groups have restricted civilian movements to tighten their hold over the areas they control, straining health care systems and causing mass displacement.
-  Armed groups forcibly abducted health workers and forced them to care for injured fighters and communities under their control.
-  The increase in extortion and kidnappings attributed to the ELN forced some health workers to flee, leaving local communities without access to health care.

Information on incidents of violence against health care in Colombia is compiled from information projects and open sources. See [Methodology](#) for further information.



THE CONTEXT

In 2024, Colombia experienced its highest levels of violence since the 2016 peace deal with Revolutionary Armed Forces of Colombia (FARC); this violence was driven by armed group fragmentation, territorial disputes and renewed clashes with the military. Southwest Colombia saw some of the worst violence, as armed groups linked to coca production and drug trafficking clashed over control of territory. The government's "Total Peace" policy failed to stop groups like the Gulf Clan, the National Liberation Army (ELN), and FARC dissidents from expanding their control over territory. Departments such as Chocó, Cauca, Nariño, and Putumayo faced increased violence, displacement, and movement restrictions.

Between January and May 2024, internal displacement rose by 36% and confinement cases (a method armed groups used to restrict civilian movement and trap populations in order to exert control over a territory and its economy) jumped 171% compared to the same period in 2023. According to OCHA, 53,600 people were confined and 29,200 displaced in parts of Putumayo and Caquetá departments, putting additional pressure on health care systems.

While health care access has improved over the years, rural and marginalized communities remain disproportionately underserved.



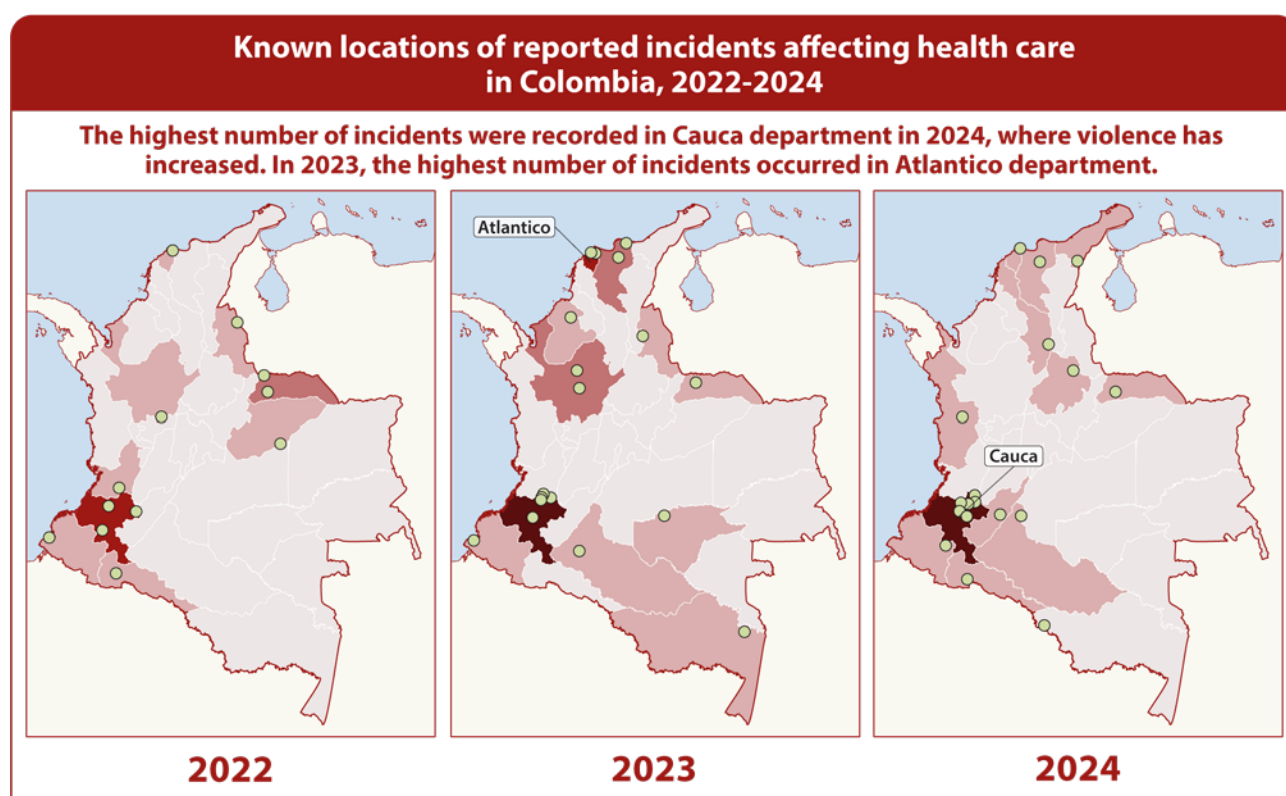
VIOLENCE AGAINST OR OBSTRUCTION OF HEALTH CARE IN 2024

Incidents of violence against or obstruction of health care were recorded throughout 2024 and were spread over 12 of Colombia's 32 departments. Cases more than doubled in Cauca department in 2024, representing nearly half of all reported incidents.



Publicly reported incidents of armed violence inside hospitals and pharmacies and attacks on ambulances rose in 2024. Overall, the majority of incidents were attributed to unidentified men armed with guns. In two incidents, the perpetrators claimed responsibility for the attacks. Gulf Clan members on a motorcycle shot and killed a health facility security guard in Magdalena department,¹ and a note signed by the Gulf Clan was left next to his body. ELN members forced an ICRC convoy transporting an injured patient to stop for two hours, and the group issued a statement confirming the incident, stating that the convoy was stopped for verification and security reasons.² The use of explosive weapons that impacted health care was reported on two occasions in Colombia in 2024. FARC dissidents launched a drone armed with explosives that struck close to a hospital in Suarez city, injuring three people, including a baby.³ An improvised explosive device (IED) of unidentified origin was detonated inside a pharmacy in Chocó department, injuring many people.⁴

Most publicly reported incidents affected health care providers working for national health structures, with one publicly reported incident each affecting an NGO and the ICRC.⁵



Source: Safeguarding Health in Conflict Coalition

Health facilities attacked

Hospitals and pharmacies were attacked at least seven times in 2024, compared to one publicly reported incident in 2023 and three in 2022. Health facilities were sometimes described as “battlegrounds” where hospitalized patients were fatally shot in planned assassinations. For example, three unidentified individuals dressed as patients entered the High Complexity Hospital in Putumayo department, shot and killed two registered patients, and injured another who later died from his injuries. While the perpetrators were not identified, the Carolina Ramirez FARC dissident group and other local gangs were active in the area.⁶ Other incidents in which health facilities were attacked include the previously mentioned drone strike and IED detonation.



Attacks on emergency medical services

Emergency medical services were attacked on seven occasions in 2024. Two patients and an ambulance driver were killed and the driver of a river boat ambulance was kidnapped. Two ambulances were ambushed, looted of medical equipment, and set on fire in Huila and Santander departments.⁷

Health workers killed and kidnapped

Six health workers were reportedly kidnapped in two incidents, compared to three in separate incidents in 2023 and one in 2022. Armed groups reportedly abducted staff to provide care to injured fighters and communities under their control in areas with limited health services. For example, five health workers were forcibly taken by an unidentified armed group in Caquetá department and reportedly taken to treat patients for the group.⁸ A driver of a river ambulance was kidnapped by three armed men in a boat while he was on a medical mission in Cauca department. He was taken to an undisclosed location, but his ultimate fate was not recorded.⁹

Three health workers were killed in three reported incidents, compared to nine in eight incidents in 2023 and four in four incidents in 2022. Health workers, including a doctor and an ambulance driver, were shot and killed in direct attacks, including an assassination at a medical facility, an ambulance ambush, and a home invasion.



This factsheet is based on 2022-2024 COL SHCC Health Care Data. Download the data [here](#) or on the [Humanitarian Data Exchange \(HDX\)](#).

THE IMPACT OF ATTACKS ON HEALTH CARE

The decades of violence in Colombia have had devastating consequences for health care access and the safety of health workers. Entire communities in conflict-affected areas often face the complete absence of medical services when health workers are threatened, kidnapped or forced to flee . The resurgence of extortion-motivated kidnappings by the ELN in 2024 intensified fear among health workers, forcing many to abandon their posts and leaving entire communities without essential health care services .

Attacks on health workers perpetuate cycles of violence and deepen inequalities, leaving Colombia's most vulnerable populations without access to critical medical care.

According to recent research on violence against health care, women health workers – 80% of the health workers in the country – are an essential part of the workforce, yet face disproportionate risks of experiencing violence, with those in rural and lower-paid roles particularly vulnerable to violence . The effects extend beyond physical harm, with medical personnel enduring significant psychological, social and economic consequences after being victims of violence.



Mass displacements and confinement have compounded health care access challenges, leaving tens of thousands of people without essential health services. The intersection of gender, race, and class inequalities exacerbates the harm, particularly to indigenous and Afro-Colombian health workers and those in rural areas, who are often exposed to both direct violence and systemic neglect.

Attacks on health workers perpetuate cycles of violence and deepen inequalities, leaving Colombia's most vulnerable populations without access to critical medical care. The government's Mision Medica program represents a positive step through its documentation, advocacy, and response efforts, although additional resources and support are needed to effectively reach underserved communities.

- 1 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 COL SHCC Health Care Data. Incident number 88129.
- 2 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 COL SHCC Health Care Data. Incident number 43997.
- 3 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 COL SHCC Health Care Data. Incident number 58347.
- 4 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 COL SHCC Health Care Data. Incident number 84777.
- 5 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 COL SHCC Health Care Data. Incident numbers 43997; 84778.
- 6 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 COL SHCC Health Care Data. Incident number 88126.
- 7 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 COL SHCC Health Care Data. Incident numbers 80687; 43996.
- 8 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 COL SHCC Health Care Data. Incident number 88136.
- 9 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 COL SHCC Health Care Data. Incident number 84775.

SAFEGUARDING HEALTH IN CONFLICT

The Safeguarding Health in Conflict Coalition is a group of more than 40 organizations working to protect health workers and services threatened by war or civil unrest. We have raised awareness of global attacks on health and pressed United Nations agencies for greater global action to protect the security of health care. We monitor attacks, strengthen universal norms of respect for the right to health, and demand accountability for perpetrators.

<https://safeguarding-health.com>

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